**DEPARTMENT OF HEALTH SERVICES** 714/744 P STREET P.O. BOX 942732 **SACRAMENTO, CA 94234-7320** (916) 323-7406



September 30, 2003

Dear Potential Proposer:

## **Notice to Prospective Proposers**

You are invited to review and respond to this Request for Proposal (RFP) Number 03-75810 entitled, "Medi-Cal Reimbursement Rate Support Services". In submitting your proposal, you must comply with the instructions found herein.

Note that all agreements entered into with the State of California will include by reference General Terms and Conditions that may be viewed and downloaded at the following Internet site: <a href="http://www.ols.dgs.ca.gov/Standard+Language/default.htm">http://www.ols.dgs.ca.gov/Standard+Language/default.htm</a>. If you do not have Internet access, a hard copy can be obtained by contacting the person signing this letter.

If a discrepancy occurs between the information appearing in the advertisement placed in the California State Contracts Register and the information herein, the information in this notice and in the RFP shall take precedence.

## I. Proposal Submission Deadline

Regardless of postmark or method of delivery, the Department of Health Services' (DHS) Office of Medi-Cal Procurement (OMCP) must receive proposal packages no later than **4:00 p.m.** on **November 4, 2003**. Refer to the attached RFP for detailed submission requirements.

## II. "Voluntary" Non-binding Letter of Intent

In this procurement, prospective proposers are asked to voluntarily submit a non-binding Letter of Intent. See the RFP for detailed Letter of Intent submission instructions.

## III. Disabled Veteran Business Enterprise (DVBE) Participation Requirements

California Law requires Disabled Veteran Business Enterprise (DVBE) participation and/or performance of a Good Faith Effort (GFE) to meet these requirements. DHS policies require DVBE participation on all contracts exceeding \$10,000. You may need four weeks or more to complete this process; therefore, you should begin this process promptly. Out-of-state firms must comply with California's DVBE participation requirements.

## IV. Funding Limit

Funding for these services may be limited to the following amounts:

- A. \$440,000 for the budget period of 07/01/03 through 06/30/04
- B. \$440,000 for the budget period of 07/01/04 through 06/30/05.
- C. \$440,000 for the budget period of 07/01/05 through 06/30/06.
- D. \$1,320,000 for the entire contract term.

Funding for each state fiscal year is subject to an annual appropriation by the State Legislature or Congress. If full funding does not become available, DHS will cancel the resulting agreement or amend it to reflect reduced funding and reduced activities. Continuation beyond the first state

fiscal year is also subject to the contractor's successful performance. Without prior DHS authorization, you may not expend funds set aside for one budget period in a subsequent budget period.

## V. RFP Changes

The following is a list of the items which have been added, deleted, or modified from the Medi-Cal Reimbursement Rate Support Services RFP issued on March 4, 2003:

#### I. Items Added:

• Exhibit H (HIPAA Business Associate Addendum)

#### II. Items Deleted:

- Attachment 5 (RFP Clause Certification)
- Exhibit B, Attachments I-V (Budget Detail Worksheets)

# III. Items Modified (Please note that the numbering of attachments/appendices may have changed):

- Attachment 2 (Certification Checklist)
- Attachment 12 (Part One Three)
- Attachment 14 (Conflict of Interest)
- Exhibit A (Scope of Work)
- Exhibit B (Payment Provisions)
- Exhibit E (Additional Provisions)
- Appendix 3 (OB 9 Map)
- Appendix 4 (Glossary)

### VI. Proposer Questions

In the opinion of the California Department of Health Services, this RFP is complete and without need of explanation. However, if you have questions or need clarifying information, put all inquiries in writing and mail or fax them to DHS according to the instructions in the RFP section entitled, "Proposer Questions".

Thank you for your interest in DHS' service needs.

Sincerely,

# **Original Signed By:**

Donna Martinez, Chief Office of Medi-Cal Procurement

Attachment